

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT							
	IND	DEP	IND	DEP	IND	DEP						
1	1						51					
2		1					52					
3							53					
4							54					
5		1					55					
6	1						56					
7		1					57					
8	1						58					
9							59					
10							60					
11							61					
12		1					62					
13	1						63					
14		1					64					
15							65					
16							66					
17		1					67					
18	1						68					
19		1					69					
20				1			70					
21		1					71					
22	1		(1)				72					
23		(1)					73					
24	1						74					
25	1	(1)					75					
26	1	(1)					76					
27		(1)					77					
28		(1)					78					
29							79					
30							80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.	8						TOTAL IND.					
TOTAL DEP.	20						TOTAL DEP.					
TOTAL CLAIMS	28						TOTAL CLAIMS					